



PTO/SB/22 (12-04)

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**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  
FY 2005**

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number (Optional)

06005/36797

Application Number

09/594,678

Filed

June 16, 2000

For **FUNCTION-BASED PROCESS CONTROL VERIFICATION AND SECURITY IN A PROCESS CONTROL  
SYSTEM**

Art Unit 2134

Examiner

T. M. Norris

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

|   | Fee    | Small Entity Fee |           |
|---|--------|------------------|-----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120  | \$60             | \$ 120.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))           | \$450  | \$225            | \$        |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))         | \$1020 | \$510            | \$        |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))          | \$1590 | \$795            | \$        |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))          | \$2160 | \$1080           | \$        |

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-2855. I have enclosed a duplicate copy of this sheet.I am the ☐ applicant/inventor.☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).☐ attorney or agent of record. Registration Number \_\_\_\_\_☒ attorney or agent under 37 CFR 1.34.Registration number if acting under 37 CFR 1.34 37,641  
Signature

May 24, 2005

Date

Roger A. Heppermann

Typed or printed name

(312) 474-6300

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to MS Amendment: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: May 24, 2005

Signature:

(Roger A. Heppermann)